FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OMB APPROVAL
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hours per response.....16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC	USE ONLY
Pretix	Serial
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	1

Name of Offering (check if this is an amend Fortress Mortgage Opportunities Onshore Fu	ment and name has changed, and indicate change.) 1nd Series 2 L.P		0E8
	Rule 504 Rule 505 Rule 506 Section 4(6)	☐ ULOE	Mall Processing Section
	A. BASIC IDENTIFICATION DATA		MAY 2371108
1. Enter the information requested about the issu	uer		
<u> </u>	nt and name has changed, and indicate change.)		Washington, DC
Fortress Mortgage Opportunities Onshore Fu Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone N	umber (Including Area Code)
1345 Avenue of the Americas, 46th Floor, Nev Address of Principal Business Operations	W York, New York 10105 (Number and Street, City, State, Zip Code)	212-798-6100 Telephone N	lumber (Including Area Code)
(if different from Executive Offices)	PROCESSED		
Brief Description of Business	• • • • • • • • • • • • • • • • • • • •		
Investment Fund	JUN 022008		
Type of Business Organization corporation Ilimit	ted partnership, alread HOMSON REUTERS, red partnership, to be formed	lease specify	
	Month Year nization: 0 4 0 8 Actual Estir ter two-letter U.S. Postal Service abbreviation for State N for Canada; FN for other foreign jurisdiction)		08047992
GENERAL INSTRUCTIONS			
Federal: Who Must File: All issuers making an offering of sec 17d(6).	curities in reliance on an exemption under Regulation D o	r Section 4(6), 17	CFR 230.501 ct seq. or 15 U.S.C
ind Exchange Commission (SEC) on the earlier of t	15 days after the first sale of securities in the offering, the date it is received by the SEC at the address given by I States registered or certified mail to that address.		
Where To File: U.S. Securities and Exchange Com	imission, 450 Fifth Street, N.W., Washington, D.C. 20:	549.	
Copies Required: Five (5) copies of this notice must shotocopies of the manually signed copy or bear type	st be filed with the SEC, one of which must be manually ped or printed signatures.	signed. Any co	pies not manually signed must be
information Required: A new filing must contain a hereto, the information requested in Part C, and any not be filed with the SEC.	all information requested. Amendments need only report material changes from the information previously suppl	t the name of the ied in Parts A and	issuer and offering, any changes B. Part E and the Appendix nece
Filing Fee: There is no federal filing fee.			
JLOE and that have adopted this form. Issuers re re to be, or have been made. If a state requires the	e Uniform Limited Offering Exemption (ULOE) for sallying on ULOE must file a separate notice with the She payment of a fee as a precondition to the claim for the appropriate states in accordance with state law.	ecurities Admini the exemption,	istrator in each state where sales a fee in the proper amount shal
	ATTENTION		
	tates will not result in a loss of the federal ex in a loss of an available state exemption unle		

A. BASIC IDENTIFICATION DATA				
2. Enter the information requested for the following:				
 Each promoter of the issuer, if the issuer has been organized within the past five years; 				
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securi	ties of the issuer			
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; an	ď			
• Each general and managing partner of partnership issuers.				
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Part.	ner			
2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years;				
1345 Avenue of the Americas, 46th Floor, New York, New York 10105				
	ner			
Full Name (Last name first, if individual)				
Fortress Mortgage Opportunities GP Series 2 LLC				
Business or Residence Address (Number and Street, City, State, Zip Code)				
1345 Avenue of the Americas, 46th Floor, New York, New York 10105				
	ıcı			
Full Name (Last name first, if individual)				
The Variable Annuity Life Insurance Company				
Business or Residence Address (Number and Street, City, State, Zip Code)				
1 SunAmerica Center, 38th Floor, Los Angeles, California 90067				
	er			
Full Name (Last name first, if individual)				
Missouri State Employees Retirement System				
Business or Residence Address (Number and Street, City, State, Zip Code)				
907 Wildwood Drive, Jefferson City, MO 65109				
	eı			
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street, City, State, Zip Code)				
	er			
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street, City, State, Zip Code)				
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partn	er			
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street, City, State, Zip Code)				
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)				

					В.	INFORMAT	TION ABOU	JT OFFER	ING				
						11			.1	.:9		Yes	No
I.	Has the	e issuer sol	ld, or does										X
2.	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?								A 000.00*				
۷.			nounts in the				uny 11101111					Yes	No.
3.	Does t	he offering	permit joir	it ownersh	ip of a sin	gle unit?						K	
4.	commi If a per or state	ssion or sin son to be li s, list the n	ntion reques nilar remun- sted is an as ame of the l you may	eration for sociated p broker or d	solicitation erson or ag lealer. If m	n of purchas ent of a bro ore than fiv	sers in conn ker or deal re (5) perso	ection with er registere ns to be lis	sales of se d with the ted are asse	curities in SEC and/o	the offering r with a stat	;. e	
Fuł	l Name (Last name	first, if ind	lividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nar	me of As	sociated B	roker or De	ealer	. •						•		
Stat	tes in W	hich Persor	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers						
	(Check	"All State	s" or check	individua	l States)		***********		*************			☐ A	ll States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	l Name (Last name	first, if ind	ividual)							<u> </u>	-	
Bus	iness or	Residence	: Address (Number an	id Street, C	City, State,	Zip Code)						
Nan	ne of As	sociated Bi	roker or De	aler	<u> </u>			· · · · -					
Stat	es in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	**********		***************************************	*****	******		Al	I States
	AL (IL) MT) RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full	Name (Last name	first, if ind	ividual)									
Busi	iness or	Residence	Address (1	Number an	d Street, C	ity, State, I	Zip Code)	 .					
Nam	ne of Ass	sociated Br	oker or De	aler					<u> </u>				
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	•				···-	
	(Check	"All States	" or check	individual	States)			••••		•••••	••••••	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pr		Amount Already Sold
	Debt	\$ 0.00		\$0.00
	Equity			\$0.00
	Common Preferred			
	Convertible Securities (including warrants)	\$ 0.00		\$0.00
	Partnership Interests		.00	\$96,550,000.00
	Other (Specify)			\$0.00
	Total		.00	
	Answer also in Appendix, Column 3, if filing under ULOE.			<u> 100 V/A</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate Dollar Amount of Purchases
	Accredited Investors	13		\$96,550,000.00
	Non-accredited Investors	0		\$0.00
	Total (for filings under Rule 504 only)			s
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total			s
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		Z	\$ <u>0.00</u>
	Printing and Engraving Costs		Z	\$ <u>0.00</u>
	Legal Fees		Z	\$ 0.00
	Accounting Fees		Ø	\$ <u>0.00</u>
	Engineering Fees		\square	\$ <u>0.00</u>
	Sales Commissions (specify finders' fees separately)		<u></u>	\$ <u>0.00</u>
	Other Expenses (identify)		<u></u>	\$ 0.00
	Total		Z	\$0.00*

*all expenses in this Section 4.a. are borne by Fortress Mortgage Opportunities Master Fund Series 2 L.P.

•	OFFERING PRICE	MEMORD	OF IMPRETORS	EVDENCEC.	AND US	E VE BRVCE
	UPPERING PRICE	NUMBER	THE INVESTORS.	. F. X F F. N. N. N. N.	ANII UN	P. CJK P'KCH. I

	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C — proceeds to the issuer."	· ·	oss	\$ <u>96,550,000.00</u>
S.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate a If the payments listed must equal the adjusted gr	and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			\$0.00
	Purchase of real estate		🔽 \$ <u>0.00</u>	₹ \$0.00
	Purchase, rental or leasing and installation of ma- and equipment		🗸 \$ <u>0.00</u>	[7] \$0.00
	Construction or leasing of plant buildings and fac-	cilities	[<u>/</u>] \$ <u>0.00</u>	2 \$0.00
	Acquisition of other businesses (including the val offering that may be used in exchange for the asse issuer pursuant to a merger)	ets or securities of another	[7] \$0.00	₹ \$0.00
	Repayment of indebtedness			✓ \$0.00
	Working capital		~	7 \$0.00
	Other (specify): Capital for investment purposes	<u>;</u>	№ \$0.00	\$96,550,000.00
			 🔀 \$ <u>0.</u> 00	∑ \$0.00
	Column Totals		🗸 \$ <u>0.00</u>	5 \$ <u>96,550,000.00</u>
	Total Payments Listed (column totals added)		<u>[7]</u> \$ <u>96,</u>	550,000.00
		D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur nformation furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Comr	nission, upon writte	
	er (Print or Type) ress Mortgage Opportunities Onshore Fund Series 2 LP	Signature A. Black	Date 5/21/0	8
Nan	e of Signer (Print or Type)	Title of Signer (Print or Type)		
Roi	y A. Babich	Authorized Signatory and Secretary, Fortress Mortgage C		LLC, as General Partner o

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	<u>-</u> .	
ŧ.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
	provisions of such rule?		K

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature 2 21 1	Date	. 1	
Fortress Mortgage Opportunities Onshore Fund Series 2 LP	Joy a. Balich	5/	21/0	Š
Name (Print or Type)	Title (Print or Type)	•	,	
Rory A. Babich	Authorized Signatory and Secretary, Fortress Mortgage O		GP Series 2	LLC, as General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX I 2 3 4 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate to non-accredited offering price Type of investor and explanation of amount purchased in State offered in state waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount Investors Amount Yes No ΑL ΑK AZAR Interests, \$25,050,000.00 CA2 \$25,050,000.00 \$0.00 CO Interests, \$6,100,000.00 CT\$6,100,000.00 0 \$0.00 .DE DC FL GA HI ED *I*.L Interests, \$4,000,000.00 \$4,000,000.00 \$0.00 IN IA ĸs $\mathbf{K}.\mathbf{Y}$ LA ME MDMA MI MN MS

4 5 l 2 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach Type of investor and offering price explanation of to non-accredited amount purchased in State investors in State offered in state waiver granted) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes Investors State Yes No Investors Amount No Amount Interests, \$50,000,000.00 0 \$0.00 MO 1 \$50,000,000.00 MT NE NV NH NJ NM Interests, \$8,400,000.00 \$0.00 NY \$8,400,000.00 NC ND OH OK OR Interests, \$1,000,000.00 PA \$1,000,000.00 \$0.00 RISC SD TN TX UT VT Interests, \$2,000,000.00 VA0 \$0.00 \$2,000,000.00 WA. WVV/I

APPENDIX

				APP	ENDIX								
I		2	3		5 Disqualification								
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				amount purchased in State			under St (if yes explan waiver	ate ULOE , attach ation of granted) -Item I)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
WY													
PR			!										

END